| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  /0600208   |  |                              |                 |                              |              |                  |      |                          |                        |            |                     |               |
|--|--|------------------------------|-----------------|------------------------------|--------------|------------------|------|--------------------------|------------------------|------------|---------------------|---------------|
|  |  |                              |                 |                              |              |                  |      |                          |                        |            | OTHER<br>SMALL E    |               |
| TO   | TAL CLAIMS                                     |                              | ·               |                              |              | 1                | RATE | FEE                      |                        | RATE       | . FEE               |               |
| FO   | PT   |                              | NUMBER F        | ILED                         | NUMBER EXTRA |                  |      | BASIC FE                 | E 375.00               | OR         | BASIC FEE           | 770.00        |
| TOTAL CHARGEABLE CLAIMS  |  |                              | 41 min          | us 20=                       | . 21         |                  |      | XS 9=                    | 189.00                 | OR         | X\$18=              |               |
| INDEPENDENT CLAIMS   |  |                              | 6 minus 3 =     |                              | • 3          |                  |      | X43=                     | 178.00                 | OR         | X86=                |               |
| MU   | ILTIPLE DEPEN                                  | DENT CLAIM PE                | RESENT          |                              |              |                  |      | +145=                    |                        | OR         | +290=               |               |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |                              |                 |                              |              |                  |      |                          | 6900                   | OR         | TOTAL               |               |
| CLAIMS AS AMENDED - PART II SMALL ENTITY OR  |  |                              |                 |                              |              |                  |      |                          |                        |            | OTHER<br>SMALL      |               |
| (Column 1)   |  |                              |                 |                              |              | (Column 3)       | 1 1  | SMALI                    |                        | 3          | 3                   | ADDI-         |
| IT A   |  | CLAIMS<br>REMAINING<br>AFTER |                 | HIGH<br>NUM<br>PREVK<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |      | RATE                     | ADDI-<br>TIONAL<br>FEE |            | RATE                | TIONAL<br>FEE |
| MENOMENT A   | Total  | AMENDMENT                    | Minus           |                              | 7            | a                |      | X\$-9=                   | 17                     | OR.        | _X\$18=             |               |
| MEN  | Independent                                    | . 10                         | Minus           | 3                            |              | =                |      | X43=                     | 17                     | OR         | X86≖                |               |
| ₹  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                              |                 |                              |              |                  | •    | . +145=                  | 1/                     | OR         | +290=               |               |
| RCE  |  |                              |                 |                              |              |                  |      | . 101/                   |                        | 4          | TOTAL<br>ADDIT. FEE | ·             |
| 1-26-61  |  |                              |                 |                              |              |                  |      | ADDIT. FE                | E <b>L</b>             | <b>1</b> 0 | ADDIT. FEE          |               |
|  | , ,,,  | (Cololini I)                 |                 | (Colu                        |              | . (Column 3)     | •    |                          | AODI                   | 7          |                     | ADDI-         |
| 0  | ·  | CLAIMS<br>REMAINING          | . '             | NUM                          |              | PRESENT          |      | RATE                     | ADDI-<br>TIONAL        | 1          | RATE                | TIONAL        |
| AMENDMENT  |  | AFTER                        |                 |                              | OUSLY        | EXTRA            |      | HAIL                     | FEE                    |            |                     | FEE           |
|  | Total  | . 77                         | Minus .         | · 人                          | FOR          | -36              | 1    | 23<br>X\$ <del>9</del> = | 7                      | OR         | X\$18=              |               |
| NEN  | Independent                                    | . 6                          | Minus           | ***                          | 0            | =                | 1    | X43=                     |                        | OR         | X86=                |               |
| ₹  | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |                              |                 |                              | T CLAIM      |                  | J    | +145=                    | Pa                     | OR         | +290=               |               |
|  |  |                              |                 |                              |              |                  |      | 101/                     |                        | OR         | TOTAL<br>ADDIT. FEE |               |
| (Caluma 1) (Column 2) (Column 3)   |  |                              |                 |                              |              |                  |      | ADDIT. FE                |                        | _          |                     |               |
| _  |  | (Column 1)                   |                 | HIGHEST                      |              | 100,0,1,1,0,7    | 7    |                          | ADDI-                  | 7          |                     | ADDI-         |
| ပ  | 1,   | REMAINING                    |                 |                              | 18ER         | PRESENT          | 1    | RATE                     |                        |            | RATE                | TIONAL        |
| E  |  | AFTER                        |                 |                              | FOR          | EXTRA            | _    |                          | FEE                    | 1          | <u> </u>            | FEE           |
| AMENDM.:NT C   | Total  |                              | Minus           | -                            |              | 8                |      | X\$ 9=                   |                        | OR         | X\$18=              |               |
| ME   | Independent                                    | •                            | Minus           |                              |              | •                | 1    | X43=                     |                        | ОЯ         | X86=                |               |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                              |                 |                              |              |                  |      | +145=                    |                        | OR         |                     |               |
| -  | 11 the east to east.                           | ma f is lose than th         | e entry in cots | mn 2. writ                   | e "0" in co  | furmn 3.         |      | TOTA                     |                        | 1-         | TOTAL               |               |
| If the entry in column 1 is less than the entry in column 2, write "O' in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE  ADDIT FEE  Total  ADDIT FEE  Total  OR  ADDIT FEE  Total  AD |  |                              |                 |                              |              |                  |      |                          |                        |            |                     |               |

Application or Docket Number